THE NMIMC NEWSLETTER

"FY 2000 is the Year of Data Quality"
VADM R. A. Nelson, MC, USN, August 1999

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In the last two Newsletters, I have focused on the specific issues of Navy Marine Corps Intranet (NMCI) and the "Webification" of Navy Medicine. In the last issue, I took that a step further by providing an overview of what specific efforts NMIMC is undertaking and/or has put into place to aid BUMED and the MHS in attaining that lofty goal. This week, however, we will get back down to "brass tacks" and devote this issue to my command's ongoing endeavors to best serve our customers. I will take this opportunity to bring you all up-to-date on programs and issues pertinent to our efforts to **"Do FOR You - the customer!"**

Additionally, Monday through Wednesday of next week, I am taking my senior staff off-site. We will focus on refining the goals, objectives, and annual plan that will ensure alignment of NMIMC with the goals and objectives of Navy Medicine and carry us into the new calendar year. This will be an exciting opportunity to check how far we have come, and to explore the direction we now need to take in our continuing effort to support Navy Medicine's Strategic Plan, and the needs of our world-wide network of customers.

Finally, this is the last time we will fly the Newsletter under the banner of "**FY2000 is the Year of Data Quality."** As we head toward a new era in Information Management, **"Optimization Through Webification"** will be our banner for the Volume 3 of the Newsletter. Thank you all for the support and advice you have provided over the past two years. I commit to you to continue our efforts to improve quality and value of NMIMC's services to you.

<div align="center">L.J. WALTERS, CAPT, MSC, USN</div>

SENSITIVE INTERNET PROTOCOL ROUTER NETWORK (NIPRNet) Connection Status

Thank you for your support! I really appreciate the rapid responses that all of you provided to help me comply with DISA's reporting requirements. The 31 unclassified NIPRNet circuits have all been accounted for in DISA's database. Our next challenge will be to seek full accreditation of the circuits for all activities in the coming year. This concentrated effort will ensure that our T-1 connections become more secure and provide additional protection to our Navy Medicine customers. This will be an especially important process as we head toward HIPAA. Please direct any inquiries to my POC, ENS Steven Reinkemeyer at (301) 319-1029, or email at spreinkemeyer@us.med.navy.mil .

INTEGRATED PROGRAM PLANNING, SCHEDULING AND REPORTING SYSTEM (IPPSRS)

As noted in my 7 July 2000 newsletter, our effort to eliminate unannounced or conflicting site visits continues. CDR Marty Young, my representative to the IPPSRS Working Group, meets weekly with the MHS IM/IT program managers to manage deployments across the enterprise. This working group uses the IPPSRS database to resolve conflicts over a rolling 180-day deployment window.

Earlier this year a second-generation, web-accessible MHS integrated AIS deployment schedule was established on the MHS home page. This IPPSRS initiative provides an important enhancement for MHS IM/IT program management and gives you the opportunity to visualize system deployments to your region and Command. The URL for direct access to the IPPSRS web site is http://www.tricare.osd.mil/ippsrs. After accessing the IPPSRS web site, you can quickly navigate to the schedules by clicking on the IT Systems Schedules tab and logging on using the 'Quick Query' feature or registering for a user id and password.

I encourage your support of the IPPSRS web site schedule as the official place to find and give feedback about the most current AIS deployment schedules. Your staff may also "block" times on IPPSRS that any visit would conflict with local ops, such as IG/JCAHO visits, Fleet Hospital training, etc. Please use the online feedback form and e-mail or contact Mr. Frank Bunn at fjbunn@us.med.navy.mil or at 301-319-1012 if there are any problems or conflicts with other evolutions at your Command.

NAVAL TELEMEDICINE BUSINESS OFFICE (NTBO) SUPPORTS FLEET MODERNIZATION PROGRAM – SITREP FY00 – COMPUTED RADIOGRAPHY REPLACES ANALOG FILM

As you may know, the NTBO, in partnership with NMLC, NAVSEA and SPAWAR, provides program and technical support to the field in support of computer radiography (CR) on the Navy's LHA/LHD/CV/CVN/TAH ships. I am pleased to report that as of 1 October, twelve (12) ships will be configured with CR, replacing wet film processing. Three of these ships are routinely transmitting digital x-ray images to NNMC and NMC San Diego for interpretation by a radiologist or other medical specialist. Two additional ships are transmitting digitized film data until they get the CR upgrade next year. The NTBO CR-TR Status web page http://navmedinfo.med.navy.mil/ntbo/CR_TR.htm provides current details.

For more information and progress on operational Telemedicine consult the NTBO homepage at http://navmedinfo.med.navy.mil/ntbo/. My POC is LCDR Kim Corley, MSC, USN, at (301) 319-1071 or kcorley@us.med.navy.mil.

Patriot's Choice

Sunkissed computers for Y2K replacement are fully funded by BUMED with no payments deducted from your budget. For "Get Well" computers ordered above Y2K requirements, the second year lease payments were deducted from your Command budget in July 2000. The third year payment will be deducted in 4th quarter FY01. Computers that you have purchased through Patriot's Choice have second year payments due in FY01. The second year payment will be deducted in the quarter in which they were originally purchased.

The POC for Patriot's Choice is Ben Weaver (301) 319-1275 or BEWeaver@us.med.navy.mil

DATA QUALITY TRAINING IN JAPAN

My staff in the Data Quality, Decision Support, Business Intelligence and Knowledge Management Directorate (Code 06) recognizes the importance of supporting the MTFs in determining the underlying causes associated with coding issues at the grass roots level. Identifying these underlying causes will enable decision-makers to determine the resources needed to address the data quality/data integrity issues identified in the discovery phase, resulting in data consistency, accuracy and reliability prior to transmission.

Ms. Shannon McConnell-Lamptey, a member of my Code 06 staff and Ms. Ciel Lazo from the BUMED staff will be conducting a two week ADS/KG-ADS coding training course for Yokosuka scheduled for first quarter FY01. The training course is part of Yokosuka's "Quality Care Warrants Accuracy and Quality Coding/Documentation" initiative with emphasis on the following areas: diagnosis coding rules, external causes and V-Codes, Evaluation and Management (E&M) service codes, and Current Procedure Terminology (CPT) specialty coding. My POC for this effort is Ms. McConnell-Lamptey at (301) 319-1163 and email simcconnell-lampety@us.med.navy.mil.

THE NEED FOR ADS AND/OR KG-ADS

I have found that many Commands have questioned the need for ADS and/or KG-ADS for the collection and tracking of patient encounters. I know you are well aware of the importance of having **your providers** track patient encounters. KG-ADS automates the manual accumulation, analysis, and formatting of workload reports based on CPT, ICD and E&M codes. It expedites the collection of outpatient ambulatory data and provides the capability to produce workload and patient demographic reports via Business Objects and the ADS database server.

As we move into the new Managed Care Support Contracts and our partnerships for TRICARE, this data will become more pertinent. Fundamentally, the information you provide through the "bubble sheet" or electronic data entry rolls up into the workload data, which is then used to measure and evaluate your staffs' productivity. In turn, this information directly impacts your operating budget through the ADS interface with MEPRS. KG-ADS will save the commands future purchase costs of "bubble sheets" and streamlines the data collection process, resulting in efficient use of time and dollars. Bremerton, Beaufort, Okinawa, and London are currently 100% users of KG-ADS, reporting data input times of 20-40 seconds per encounter. This system will prepare our facilities for the eventual move to CHCS II.

Please direct your inquiries to my POC for this program, Rolando Estrada, at (301) 319-1284 or email restrada@us.med.navy.mil.

MICROMEDEX

I am pleased to report that funding has been approved to purchase a central license for MICROMEDEX pharmacology and toxicology databases to support all of Navy Medicine. Procurement is currently in progress, and the subscription is expected to be available within the next few weeks.   Modules included in the subscription are IDENTIDEX, DRUGDEX, POISINDEX, CARENOTES, CURRENT CONTENTS, DRUG-REAX, TOMES, REPRORISK, EMERGINDEX, U.S. PHARMACEUTICAL MSDS, and MARTINDALE. A central system will be implemented that will allow users to access the databases via their Web browsers. Sites will also be able to obtain copies of the software for local use in the event that the central system is not accessible.

Since the central license will support all Navy and Marine Corps activities, these sites should not renew local MICROMEDEX subscriptions*. **No point in paying twice**! The POC for additional information on the MICROMEDEX subscription is Mr. Frank Becker, who can be reached by e-mail at fjbecker@us.med.navy.mil and by phone at 301-319-1229.

NMIMC INTRODUCTION

It is my pleasure to introduce LTJG Octavis Denise "Hope" Lampkin. LTJG Lampkin is a prior Coast Guard Officer. She comes to the Navy from the Coast Guard Recruiting Center where she was the West Coast Zone Leader, Chief of Officer Program Branch, Scholarship Program Coordinator, and Morale Officer. LTJG Lampkin earned a Masters of Science in Healthcare Administration from the George Washington University. Currently, she is the Department Head of the Help Desk. LTJG Lampkin is a native of Anguilla, MS. She is a welcome addition to NMIMC and the Navy Medical Service corps.